

North East LHIN Board Package

Audit and Governance Meetings
Teleconference

Thursday, September 26, 2013

**North East Local Health Integration Network
Audit Committee Meeting**

Thursday, September 26, 2013

1:30 p.m.

Teleconference

Public 1-866-696-5894 #1595881

NOTE: DIRECTORS ARE REQUESTED TO NOTIFY THE CHAIR PRIOR TO THE COMMENCEMENT OF THE BOARD MEETING WITH RESPECT TO POTENTIAL CONFLICTS OF INTEREST ARISING FROM ITEMS ON THE AGENDA.

Item No.	Topic	Lead	Proposed Outcome	Page No.
Audit Committee Meeting				
1.0	Call to Order	Colin Germond		
2.0	Declaration of Conflict of Interest	Colin Germond		
3.0	Approval of Agenda	All	D	3
4.0	Approval of Minutes of previous proceedings	All	D	4
5.0	Business Arising From Previous Meeting <ul style="list-style-type: none"> Update on accommodation plan 		I	8
6.0	Update on NBRHC eligibility of working funds assistance	Kate Fyfe	I	10
7.0	Q2 Reports	Kate Fyfe	I	14
8.0	Review audit committee workplan	Kate Fyfe	I	24
9.0	New Business	Colin Germond	I	
10.0	Next Meeting <ul style="list-style-type: none"> October 24, 2013 (Board of Directors) November 28, 2013 (Audit Committee) 	Colin Germond	I	
11.0	Adjournment of Audit Committee Meeting	Colin Germond	D	25

D=Decision, I=Information

Committee Members:

Colin Germond, Chair of Audit Committee and Board Director

Elaine Pitcher, Chair of the Board of Directors

Danielle Belanger-Corbin, Vice-Chair of the Board of Directors

Cecilia Bruno, Board Director

Santina Marasco, Board Director

Louise Paquette, Chief Executive Officer (ex-officio)

Martha Auchinleck, Senior Director (ex-officio)

Kate Fyfe, Senior Director (ex-officio)

Resolution
North East Local Health Integration Network (the “Corporation”)

Motion No.: 2013-AC011

Moved by: _____

Seconded by: _____

Thursday, September 26, 2013

RESOLVED THAT:

The agenda for the Audit Committee meeting of Thursday, September 26, 2013, be approved as presented.

Colin Germond
Chair of the Audit Committee

**NORTH EAST LOCAL HEALTH INTEGRATION NETWORK
BOARD RELATED MEETING(S)
AUDIT COMMITTEE**

Teleconference

1:30 p.m.

MINUTES OF PROCEEDINGS – REGULAR SESSION

Thursday, May 23, 2013

ROLL CALL

Members in Attendance: via teleconference	Colin Germond Elaine Pitcher Santina Marasco
Regrets:	Cecilia Bruno Danielle Bélanger-Corbin
Staff:	Louise Paquette, Chief Executive Officer Kate Fyfe, Senior Director Lara Bradley, Communication Officer Ryan Jeffers, Controller/Corporate Services Manager
Guests:	Steve Stewart, Deloitte and Touche Gerald Gauthier, Deloitte and Touche

CALL TO ORDER

Colin presided over the meeting and called the meeting to order at 1:36 p.m.

DECLARATION OF CONFLICT OF INTEREST

No conflicts of interest were declared or identified.

AGENDA

{ Motion 2013-AC007 }

Moved by Santina Marasco, seconded by Elaine Pitcher.

Be it resolved that the agenda for the Board of Directors Audit Committee meeting of Thursday, May 23, 2013 be approved as presented.

{ Carried }

MINUTES OF LAST MEETING

{ Motion 2013-AC008 }

Moved by Elaine Pitcher, seconded by Santana Marasco

Be it resolved that the Minutes of Proceedings for the Board of Directors Audit Committee meeting of April 25th, 2013 be approved as presented.

{ Carried }

BUSINESS ARISING

Office Space in North Bay –Kate Fyfe

We are continuing to look at strategies to relocate the North Bay office to a more suitable space and hope to provide a more fulsome report with options at a future meeting.

NEW BUSINESS: Colin Germond

There were no new business topics presented for decision or discussion.

AUDITORS' REPORT – Steve Stewart and Gerald Gauthier, Deloitte and Touche

The Auditors found no errors or omissions. In addition the report deemed all disclosures to be appropriate. The Auditors commended the work of the NE LHIN's Controller (Ryan Jeffers) and other staff in preparing all the necessary documents for Deloitte and Touche to conduct their review three weeks after year-end (March 31st). When asked by the Committee whether there are any recommended areas for improvement, the auditors replied "no". The Committee asked several questions regarding the processes for the audit to take place each year. The committee thanked the auditors for their work and commended staff on their preparation for this annual responsibility.

{ Motion 2013-AC009 }

Moved by Santana Marasco, seconded by Elaine Pitcher

The 2012/2013 Auditor's Report be approved as presented on May 23, 2013 and be brought forward to the North East LHIN Board for approval at the next Board meeting.

{ Carried }

SAULT AREA HOSPITAL WORKING FUNDS INITIATIVE QUARTERLY REPORT- Kate Fyfe

Consistent with the prior report, the SAH is in compliance and is eligible to receive the working funds relief. The Audit Committee asked questions regarding eligibility and heard the Timmins and District Hospital will also qualify to receive these funds. Elaine asked that Kate provide a one page explanation of the criteria so that she can share it with other Hospital Board chairs and members.

{ Motion 2013-AC0010 }

Moved by Elaine Pitcher, seconded by Santana Marasco

The Audit Committee receive and approve the Sault Area Hospital Working Funds Report..

{ Carried }

NEXT MEETING

The next Audit Committee meeting will take place via teleconference on Thursday, September 26, 2013.

ADJOURNMENT OF AUDIT COMMITTEE MEETING

{ Motion 2013-AC0011 }

Moved by Santana Marasco, seconded by Elaine Pitcher.

Be it resolved that the Board of Directors Audit Committee meeting of Thursday, May 23, 2013 be adjourned at 2:06 p.m.

{ Carried }

Colin Germond
Chair of the NE LHIN Audit Committee

Resolution
North East Local Health Integration Network (the “Corporation”)

Motion No.: 2013-AC012

Moved by: _____

Seconded by: _____

Thursday, September 26, 2013

RESOLVED THAT:

The minutes for the Audit Committee meeting of May 23, 2013 be approved as presented.

Colin Germond
Chair of the Audit Committee

North East LHIN Briefing Note

Accommodation Review

September 19, 2013

Summary of Information

- The briefing note summarizes the status on the Accommodation review. The briefing note sets out the background and context of the Realty Directive, the process requirements, the NELHIN current state, and the identified actions or next steps.

Background and Context

- In April 2013 Management Board of Cabinet released an updates Realty Directive and Ministry of Infrastructure released a corresponding Realty Policy. These documents and the revised rules contained challenged the LHINs compliance on their leased space and the lease agreements.
- The current NE LHIN lease and accommodations status is attached. In total the NELHIN leased accommodation space is 14,805.
- The LHIN continue to review the opportunities to ensure accommodation space is aligned with the service requirements and expectations from our providers.
- To reduce travel time and improve accessibility for our HSPs to connect with the NELHIN program leads and officers accommodation requirements changed during the current lease terms. Currently, the North Bay Office location is greater than program needs while the Timmins location is experiencing space pressures.
- The NELHIN has commenced the required notice provisions to exit/or reduce the leased space in North Bay at the end of the lease in June 2015 or earlier if possible.

Actions

- At the 14 LHIN CEOs' discretion, a PAN-LHIN working group was struck to work with the appropriate Ministries to ensure the LHINs are compliant or working towards compliance within the allowable timeframes of the directives/policies
- This Work includes seeking clarification on definitions and exemptions contained in the documents, this includes the LHINs putting forward a request to have meeting/board rooms designated as Program Specific Accommodation space- resulting in this space not counting in the square footage per person calculation
- Business cases and accommodation plans will need to be completed once the working group has completed their work and all parameters and requirements are fully understood

Author(s)

Kate Fyfe, Senior Director System Performance
Ryan Jeffers, Controller

North East LHIN Briefing Note

Audience	<input type="checkbox"/> NE LHIN CEO <input checked="" type="checkbox"/> NE LHIN Board of Directors <input type="checkbox"/> Other:
Author(s)	Kate Fyfe, Senior Director System Performance
Date	2013/06/21
Subject	NBRHC Working Funds
Recommended Action	<input type="checkbox"/> For Decision <input checked="" type="checkbox"/> For Information <input type="checkbox"/> Other (<i>specify</i>)

Background and Context

- As part of the 2012-13 Hospital Working Funds analysis refresh process, the ministry identified that the former Northeast Mental Health Centre had a working funds surplus while the former North Bay General Hospital had a working funds deficit.
- In the application of the calculation NBRHC excluded the working funds from the former Northeast Mental Health Centre as restricted because they can only be spent on mental health services per a November 2005 transfer agreement between the Crown and the Centre.
- A key principle of the Working Funds Initiative is to calculate remedies using the Audited Financial Statements of the base year for the initiative, which for all hospitals is 2009-10. However, the hospital was amalgamated as one entity after 2009-10.
- A decision on the entity's eligibility for working funds relief was deferred pending a decision on how to deal with the calculation of remedy under the circumstances of a post base year amalgamation and the appropriate treatment of restricted funds for the combined entity.
- Committee agreed with Panel's recommendation that the ministry make a policy decision regarding recognition of the restriction and to clarify the principle around the restriction in the context of mental health funding
- Meeting with Expert Panel, NBRHC representatives and NELHIN staff to review outstanding questions related to eligibility conducted in August 2013
- Ministry accepted the recommendation of the Committee that the North Bay Regional Health Centre's mental health funds be treated as externally restricted for the purpose of calculating working funds.
- the calculation for working funds remedy will use an notionally combined 2009/10 audited financial statements as the base year and they will be included in the refresh calculations for 2013.14.
- NBRHC is entitled to \$6.85M for three years retro to 2012/13 total \$20.6M

Financial Information

NBRHC operating pressures include an unsettled PCOP funding dispute, high AFP model of project delivery, and unfavourable HSFR/HBAM results (\$5.8M 2013/14 to \$0.7M mitigated (1%)). NBRHC brought their total margin from a \$5.3M deficit in 2011/12 to a \$0.5M surplus in 2012/13 and balanced in 2013/14 (budgeted). 2013/14 budgeted working funds remains a concern at \$45M deficit.

Category	2011/12 Actual	2012/13 Year End Actual	2013/14 Budget
Total Margin	(5,301,720)	545,473	0
Working Funds	(31,272,544)	(45,622,884)	(45,484,160)

Note: total margin 2013/14 budget did not include HSFR recent results, funding impact: budget reduction \$699,213, however they did plan for \$1.0M contingency to account for this.

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Next Steps / Recommendations
<p>Recommend to support NBRHC in attaining working funds relieve to help them address their working funds deficit.</p> <p>NBRHC is working with the Ministry to quantify the eligible amount based on the program eligibility criteria</p>

Key Messages
<p>NBRHC had a surplus for 2012/13 and a balanced position budgeted for 2013/14 (from a \$5.3M deficit). They are working in a financially responsible manner and we wish to aid them in achieving the criteria to attain working funds relief.</p>

Reviewed/Approved By	
File Path: (SharePoint)	

**Ministry of Health
and Long-Term Care**

Assistant Deputy Minister
Health System Accountability
and Performance Division

5th Floor, Hepburn Block
Queen's Park
Toronto ON M7A 1R3

Telephone: (416) 212-1134
Facsimile: (416) 212-1859

**Ministère de la Santé
et des Soins de longue durée**

Sous-ministre adjoint
Division de la responsabilisation et de la
performance du système de santé

Édifice Hepburn, 5^e étage
Queen's Park
Toronto ON M7A 1R3

Téléphone : (416) 212-1134
Télécopieur : (416) 212-1859



SEP 16 2013

HLTC2980IT-2013-975

Mr. Paul Heinrich
President and Chief Executive Officer
North Bay Regional Health Centre
50 College Drive
P.O. Box 2500
North Bay ON P1B 5A4

Dear Mr. Heinrich:

Re: Hospital Working Funds Deficit Initiative – North Bay Regional Health Centre

The Ministry of Health and Long-Term Care (ministry) would like to thank you for appearing before the Expert Advisory Panel (the Panel) of the Committee on Hospital Working Funds Deficits (the Committee) on August 29, 2013 and providing the Panel with additional information regarding North Bay Regional Health Centre's restriction on mental health funds.

The ministry has accepted the recommendation of the Committee that the North Bay Regional Health Centre's mental health funds be treated as externally restricted for the purposes of calculating hospital working funds. As a result, North Bay Regional Health Centre is eligible for working funds remedy provided the hospital meets program eligibility requirements in 2013/14 and is able to identify an appropriate use of the funds. To be consistent with program parameters and methodology, the calculation for working funds remedy will use the notionally combined 2009/10 audited financial statements as the base year.

In order to update the adjusted working funds deficit amount as at March 31, 2013 and the future performance targets to be included in the hospital's Working Funds Accountability Agreement, the ministry will include North Bay Regional Health Centre in the 2013/14 fiscal year refresh using the 2012/13 audited financial statements and this year's Working Funds Questionnaire.

.../2

Mr. Paul Heinrich

Please do not hesitate to contact Judy Switson, Manager, LHIN Liaison Branch at 416-326-6026 or Judy.Switson@ontario.ca or Alicia Yhap, Manager, Accounting Policy and Financial Reporting Branch at 416-212-5820 or Alicia.N.Yhap@ontario.ca if you have any questions.

Thank you for your continued support.

Sincerely,

A handwritten signature in black ink, appearing to read "Catherine Brown". The signature is fluid and cursive, with the first name "Catherine" and last name "Brown" clearly distinguishable.

Catherine Brown
Assistant Deputy Minister

- c: Louise Paquette, Chief Executive Officer, North East Local Health Integration Network
Mike Weir, CAO/Assistant Deputy Minister, Corporate Services Division, Ministry of Health and Long-Term Care
Kathryn McCulloch, Director, Local Health Integration Network Liaison Branch, Ministry of Health and Long-Term Care
Charles Brown, Director, Accounting Policy and Financial Reporting Branch, Ministry of Health and Long-Term Care

North East LHIN Briefing Note **Quarterly Reports – 2nd Quarter Results**

September 19, 2013

Summary of Information

- The briefing note details the 2nd Quarter Report financial performance for the NE LHIN. The briefing note also reports on the system risks identified and the corresponding management plan to mitigate.

Background and Context

- The quarterly submission to the Ministry is due at the end of each quarter and includes the following reports:
 - Balance Sheet Forecast
 - Transfer Payment Reallocations
 - Transfer Payment Sector Forecast
 - LHIN Operations Forecast
 - Risk Report (Detailed report to follow)
 - Local Health System Update
- The second quarter report is due September 30, 2013

Reports: Summary of Position Q2

Balance Sheet Forecast

- Ministry Payable is our 12/13 Surplus, will likely be recovered in the 4th quarter
- Other Accounts Payable include a payroll accrual entry and a vacation accrual entry, both of which need to be booked each month to record the financial obligations for the current period.

Reallocation

- There are four reallocations on this report which have already occurred, three are integrations done within sector
- The fourth item is a recovery from SAH which was transferred to numerous agencies across various sectors
- There are a number of small reallocations planned to take place in Q3

Sector Forecast

- This report presents the funding that has been allocated to each sector in the most recent MLPA release (August)
- The LHIN is on schedule to fully allocate the funding across each sector

Operations Forecast

- The forecast shows a balance year-end position, very closely aligned with the budget
- The capitalized item was expected to have been completed in March but ended up being completed in April, thus now being reflected in the 13/14 forecast. At the time the budget was completed it was thought this item would be part of our 12/13 fiscal year
- The forecast is done following historical trending and planned future events

Risk Report

- Detailed report is in progress and will be provided prior to the meeting. As indicated in the prior quarter, HSPs at risk to balance are required to submit Improvement plans.

Author(s)

Kate Fyfe, Senior Director System Performance
Ryan Jeffers, Controller

2013/14 Q2 Local Health System Update

Section 2.3 of the Guidelines – Report Required for Q2 Only

LHIN: North East

Description: The LHS update is meant to provide a snapshot of the local health system and serve as an executive summary outlining key elements, initiatives, important developments and particular challenges they may be facing.

Please provide an update on the following items:

1. An update on the progress of the LHIN's commitments, activities or initiatives outlined in its annual business plan (highlighting the key initiatives from its plan, important developments and their resulting impacts, and particular challenges that the LHIN may be facing).
Primary Care The implementation of the NEJACs provide more options for care for Northerners while successfully reducing wait times for hip and knee surgery. Once assessed, 64 per cent of clients last year (2012.13) were determined to be better suited for treatment, rather than surgery. Patients are given the opportunity to review surgeons' wait lists and opt to select the next available surgeon practicing anywhere within the NELHIN. The NELHIN provided funding for a pilot project with HSN in Sudbury whereby patients with shoulder issues are being seen through the JAC. Early signs are favourable.
Enhancing Care Coordination and Transitions to Improve Patient Experience In the second quarter the NELHIN completed a voluntary integration of the NESGS to NBRHC. In the plan, the transfer of program sponsorship will enable the expansion of the geriatric services across our region. Work has progressed on the development of a model for non-urgent interfacility patient transportation across the region. The project includes the development of: a clinical decision making framework, vehicle and staffing standards, dispatch/service coordination and system governance. The project with future model development and implementation planning is expected to be completed by the end of December 2013.
3. Major activities or initiatives undertaken by the LHIN that was not included in its annual business plan.
Clinical Services Review. To support our 21 small hospitals with the implementation of QBPs and HSFR the NELHIN initiated a Clinical Services Review to undertake an analysis of the current state and assist in the development of a potential future model based on the clinical handbooks, best practice and access to care. The objective of the review is to encompass a future vision of QBPs, provide an overview of the current system, develop a restructuring plan for QBP services, identify risks, barriers, mitigation strategies and an action plan to enable the successful transition to the new model. The review incorporated engagement sessions with clinicians across the system to inform the development of a future service model.
4. Additional IHSP priorities that the LHIN wishes to report on, an update on key negotiations, key cost drivers and any other important developments or initiatives within sectors.
Making Mental Health and Substance Abuse Treatment Services More Accessible In the NELHIN IHSP focus is provided across the system to improve access and system navigation for consumers and their families; and increase community treatment capacity to provide more care options while decreasing pressures on the acute sector. To this end, the NELHIN has completed the decentralization of 12 children's mental health beds so that they are more accessible to all Northerners across the region. Working with our small hospitals the NELHIN was able to commence a mental health CritiCall program and provide anti-stigma training in hospitals. ER diversion initiatives in four HUB hospitals, including a community clinic to care for people who may have previously visited the ER and the establishment of six opiate case worker positions.

2013-14 Quarterly Balance Sheet Forecast

Purpose:

To collect quarterly balance sheet forecasts information for central agency submission as required by the Ministry of Finance.

Instructions:

1. Please input all values as **positives i.e. absolute** dollars. Boxes marked grey are formulae which will produce the expected results.
2. Column E: is the 12 months actual for 2012/13. This column should match the March 31st, 2013 audited financial statements
3. Column G: input Q2 estimates for the first two quarters (i.e.6 months) of 2013-14 fiscal year.
4. Column I: input the 12 months forecast as at March 31, 2014 for fiscal 2013-14 for **Deferred Capital Contributions** and **Deferred Operating Revenues** only.
5. If you need further clarification, please contact: **Kofi Baah** tel. **416-325-1467**, email: **kofi.baah@ontario.ca**

Balance Sheet As at:	E ACTUAL (12 months) March 31, 2013	G Q2 ESTIMATE (6 months) September 30, 2013	I FORECAST (12 months) March 31, 2014
ASSETS:			
1. Cash	891,035	500,000	
2. Accounts Receivable from:			
MOHLTC	-	-	
Health Service Providers (including Hospitals)	1,537,653	-	
LHINs	-	-	
Other Govt. Reporting Entities (excluding Hospitals and GREs above)	-	-	
Other Accounts Receivable & Prepaid	100,047	50,000	
<i>Sub-Total</i>	1,637,700	50,000	
3. Tangible Capital Assets			
i. Capital Costs:			
a. Beginning Balance	1,216,490	1,371,835	
b. In-year additions / (disposals)	155,345	9,000	
c. Ending balance	1,371,835	1,380,835	
ii. Accumulated Amortization:			
a. Beginning Balance	1,051,024	1,139,624	
b. less: amortization on disposed assets	-	-	
c. In-year amortization	88,600	42,784	
d. Ending balance	1,139,624	1,182,408	
<i>NET BOOK VALUE (i less ii)</i>	232,211	198,427	
4. All Other Assets:			
TOTAL ASSETS	2,760,946	748,427	
LIABILITIES:			
5. Accounts Payable and Accrued Liabilities to:			
MOHLTC	219,907	219,907	
Health Service Providers (including Hospitals)	1,537,653	-	
LHINs	28,155	10,000	
Other Govt. Reporting Entities (Excluding Hospitals and	-	-	
Other Accounts Payable	743,020	320,093	
<i>Sub-Total</i>	2,528,735	550,000	
6. Deferred Capital Contributions from the Province (i.e. MOHLTC & Other GREs)			
a. Beginning Balance	165,466	232,211	232,211
b. In-year Capital Contributions Received/To Be Received	155,345	9,000	9,000
c. Amortization for the Year	88,600	42,784	85,234
d. Ending Balance	232,211	198,427	155,977
7. Deferred Revenue from the Province (i.e. MOHLTC & Other GREs)			
a. Beginning Balance		-	-
b. In-year Contributions Received/To Be Received			
c. Recognized in Income for the Year			
d. Ending Balance	-	-	-
8. All Other liabilities			
TOTAL LIABILITIES	2,760,946	748,427	
NET ASSETS / (LIABILITIES)	-	-	

Notes/Comments:

Completed by: Ryan Jeffers

Contact Tel. #: 705-840-1228

Date Completed: September 12, 21013

To be input by the LHINs based on the MLPA

To be input by the LHINs

Formulated

North East LHIN

2013-14 Reallocations

(including reallocations between LHINs, between sectors and within LHINs)

(\$'000)

Sector	Actual as per MLPA (Aug 31, 2013)			Sept Forecast			Total Forecast as of September 30, 2013			Q3 to Q4 Forecast			Total Forecast as of March 31, 2014			Comments		
	Base	One-time	Increase/ (Decrease) Sub-total	Base	One-time	Increase/ (Decrease) Sub-total	Base	One-time	Increase/ (Decrease) Sub-total	Base	One-time	Increase/ (Decrease) Sub-total	Base	One-time	Increase/ (Decrease) Sub-total			
A	B	C	D=B+C	E	F	G=E+F	H=B+E	I=C+F	J=H+I	I	J	K=I+J	L=H+I	M=I+J	N=L+M	O	P	Q
																\$	Type of Rationale	High Level Comment
Section A: Reallocations Between Sectors																		
HOSP	(5,591.9)	0.0	(5,591.9)			0.0	(5,591.9)	0.0	(5,591.9)			0.0	(5,591.9)	0.0	(5,591.9)		Others	from Sault Area Hospital
HOSP	1,000.0	0.0	0.0			0.0	1,000.0	0.0	1,000.0								Others	to Sault Area Hospital for Community Based, Specialized Geriatric Services
SPH		0.0	0.0			0.0	0.0	0.0	0.0			0.0	0.0	0.0	0.0		Others	
LTC HOMES	2,227.0	0.0	2,227.0			0.0	2,227.0	0.0	2,227.0			0.0	2,227.0	0.0	2,227.0		Others	Allocation to specific HSP to be determined
LTC HOMES	278.6																Others	Extendidcare (Maple View) \$133,590 Onatrio Finnish Resthome Association \$145,000
CSS	406.0	0.0	406.0			0.0	406.0	0.0	406.0			0.0	406.0	0.0	406.0		Others	Alzeihmers Society of SSM & Algoma \$12,000 Victoria Order of Nurses \$37,000 Canadian Red Cross \$250,000 Alzeihmers Society of SSM & Algome \$107,000
Community	540.3	0.0	540.3			0.0	540.3	0.0	540.3			0.0	540.3	0.0	540.3		Others	Allocation to specific HSP to be determined
ALSSH	990.0	0.0	990.0			0.0	990.0	0.0	990.0			0.0	990.0	0.0	990.0		Others	Ontario Finnish Teshome Association \$150,000 Canadian red Cross/Ontario March of Dimes \$840,000

Sector	Actual as per MLPA (Aug 31, 2013)			Sept Forecast			Total Forecast as of September 30, 2013			Q3 to Q4 Forecast			Total Forecast as of March 31, 2014			Comments		
	Base	One-time	Increase/ (Decrease) Sub-total	Base	One-time	Increase/ (Decrease) Sub-total	Base	One-time	Increase/ (Decrease) Sub-total	Base	One-time	Increase/ (Decrease) Sub-total	Base	One-time	Increase/ (Decrease) Sub-total			
A	B	C	D=B+C	E	F	G=E+F	H=B+E	I=C+F	J=H+I	I	J	K=I+J	L=H+I	M=I+J	N=L+M	O	P	Q
CMHP	150.0	0.0	150.0			0.0	150.0	0.0	150.0			0.0	150.0	0.0	150.0	\$	Type of Rationale	High Level Comment
																	Others	Sault Area Hospital
																	Others	
CSS	0.0	0.0	0.0			0.0	0.0	0.0	0.0	255.0		255.0	255.0	0.0	255.0			funding transfer within PHARA, from Supportive Housing to Attendant Outreach
ALSSH	0.0	0.0	0.0			0.0	0.0	0.0	0.0	(255.0)		(255.0)	(255.0)	0.0	(255.0)		Others	
																	Others	
HOSP	0.0	0.0	0.0			0.0	0.0	0.0	0.0	(570.0)		(570.0)	(570.0)	0.0	(570.0)			Program Transfer from Timmins and District Hospital to CMHA Chochrame/Temiskaming (\$570,000)
																	Others	
CMHP	0.0	0.0	0.0			0.0	0.0	0.0	0.0	570.0		570.0	570.0	0.0	570.0			Program Transfer from Timmins and District Hospital to CMHA Chochrame/Temiskaming (\$570,000)
ABI	0.0	0.0	0.0			0.0	0.0	0.0	0.0			0.0	0.0	0.0	0.0		Choose	
CHC	0.0	0.0	0.0			0.0	0.0	0.0	0.0			0.0	0.0	0.0	0.0		Choose	
ADDICTIONS	0.0	0.0	0.0			0.0	0.0	0.0	0.0			0.0	0.0	0.0	0.0		Choose	
TOTAL	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0			
Section B: Reallocations Between LHINs																		
HOSP	0.0	0.0	0.0			0.0	0.0	0.0	0.0			0.0	0.0	0.0	0.0		Choose	
SPH	0.0	0.0	0.0			0.0	0.0	0.0	0.0			0.0	0.0	0.0	0.0		Choose	
LTC HOMES	0.0	0.0	0.0			0.0	0.0	0.0	0.0			0.0	0.0	0.0	0.0		Choose	
CCAC	0.0	0.0	0.0			0.0	0.0	0.0	0.0			0.0	0.0	0.0	0.0		Choose	
CSS	0.0	0.0	0.0			0.0	0.0	0.0	0.0			0.0	0.0	0.0	0.0		Choose	
ALSSH	0.0	0.0	0.0			0.0	0.0	0.0	0.0			0.0	0.0	0.0	0.0		Choose	
ABI	0.0	0.0	0.0			0.0	0.0	0.0	0.0			0.0	0.0	0.0	0.0		Choose	
CHC	0.0	0.0	0.0			0.0	0.0	0.0	0.0			0.0	0.0	0.0	0.0		Choose	
CMHP	0.0	0.0	0.0			0.0	0.0	0.0	0.0			0.0	0.0	0.0	0.0		Choose	
ADDICTIONS	0.0	0.0	0.0			0.0	0.0	0.0	0.0			0.0	0.0	0.0	0.0		Choose	
TOTAL	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0			
Section C: Reallocations Within LHINs																		
																	Others	
HOSP	2,600.0	0.0	2,600.0			0.0	2,600.0	0.0	2,600.0			0.0	2,600.0	0.0	2,600.0			From SAH to Blinder River Hospital, re:responsibility for Thessalon Rationale:integration

Sector	Actual as per MLPA (Aug 31, 2013)			Sept Forecast			Total Forecast as of September 30, 2013			Q3 to Q4 Forecast			Total Forecast as of March 31, 2014			Comments		
	Base	One-time	Increase/ (Decrease) Sub-total	Base	One-time	Increase/ (Decrease) Sub-total	Base	One-time	Increase/ (Decrease) Sub-total	Base	One-time	Increase/ (Decrease) Sub-total	Base	One-time	Increase/ (Decrease) Sub-total			
A	B	C	D=B+C	E	F	G=E+F	H=B+E	I=C+F	J=H+I	I	J	K=I+J	L=H+I	M=I+J	N=L+M	O	P	Q
																\$	Type of Rationale	High Level Comment
CSS	50.1	0.0	50.1			0.0	50.1	0.0	50.1			0.0	50.1	0.0	50.1		Others	From Timiskaming Palliative Care to Kirkland District Hospital as of July 1st. \$50,054 fiscal funding and \$72,083 annual funding Rationale:integration
ADDICTIONS	588.4	0.0	588.4			0.0	588.4	0.0	588.4			0.0	588.4	0.0	588.4		Others	From Temiskaming Health Unit to CMHA Cochrane Temiskaming as of July 1st. Problem Gambling \$89,705 fiscal funding and \$119,607 annual funding. Substance Abuse Program \$498,652 fiscal funding and \$664,869 annual funding. Rationale:integration
CSS	9.1	0.0	9.1			0.0	9.1	0.0	9.1			0.0	9.1	0.0	9.1		Others	Program transfer from Timmins Senior Citizens Recreation Centre to Access Better Living (\$9,090 Fiscal, \$18,185 Annual)
CMHP	1,019.4	0.0	1,019.4			0.0	1,019.4	0.0	1,019.4			0.0	1,019.4	0.0	1,019.4		Others	Program Transfer from Adult Community Mental Health Services to CMHA Timmins (\$1,019,430 Fiscal, 1,359,254 Annual
ADDICTIONS	443.2	0.0	443.2			0.0	443.2	0.0	443.2			0.0	443.2	0.0	443.2		Others	Program transfer from Timiskaming Substance Abuse Services to CMHA Timmins (SAP) (\$443,232 Fiscal, \$664,869 Annual

Sector	Actual as per MLPA (Aug 31, 2013)			Sept Forecast			Total Forecast as of September 30, 2013			Q3 to Q4 Forecast			Total Forecast as of March 31, 2014			Comments		
	Base	One-time	Increase/ (Decrease) Sub-total	Base	One-time	Increase/ (Decrease) Sub-total	Base	One-time	Increase/ (Decrease) Sub-total	Base	One-time	Increase/ (Decrease) Sub-total	Base	One-time	Increase/ (Decrease) Sub-total			
A	B	C	D=B+C	E	F	G=E+F	H=B+E	I=C+F	J=H+I	I	J	K=I+J	L=H+I	M=I+J	N=L+M	O	P	Q
																\$	Type of Rationale	High Level Comment
ADDICTIONS	79.7	0.0	79.7			0.0	79.7	0.0	79.7			0.0	79.7	0.0	79.7		Project Delays/ New R	Program Transfer from Timiskaming Substance Abuse Services to CMHA Timmins (PG) (\$79,728 Fiscal, \$119,607 Annual
ADDICTIONS	262.5	0.0	262.5			0.0	262.5	0.0	262.5			0.0	262.5	0.0	262.5		Others	Program Transfer from Maison Arc-en-Ciel to Maison Renaissance (SAP) (\$262,464 Fiscal, \$524,929 Annual)
ADDICTIONS	0.0	0.0	0.0			0.0	0.0	0.0	0.0	345.2		345.2	345.2	0.0	345.2		Others	Program Transfer from Sudbury Addiction Treatment Program (SAP) to IRIS Addiction for Woman (SAP)
TOTAL	1,813.9	0.0	1,813.9	0.0	0.0	0.0	1,813.9	0.0	1,813.9	345.2	0.0	345.2	2,159.2	0.0	2,159.2			

Attachment Two (a)																					
NORTH EAST LHIN QUARTERLY FORECAST BY SECTOR - SECOND QUARTER (\$000'S)																					
By Sector	(A) Funding Allocation (Note 1)	(B) In-Year Adjustments	(C=A+B) Revised Allocation	(D) Actuals (IFIS) by Quarter 1 (Q1) (Note 1)			% Expended to-date	(E) Actuals (IFIS) July to August (Note 1)			(F) Estimated September Expenditure (Note 2)			(G) Forecast by Quarter 2 (Q2)			% Expended to-date	(H) Forecast by Quarter 3 (Q3)			% Expended to-date
	(Based on draft MLPA August 31/2013 Update)	(Note 1)	(Note 1)	Payments to Government Reporting Entity (GREs)	Payments to non-GRE Recipients	TOTAL Q1 ACTUAL		Payments to Government Reporting Entity (GREs)	Payments to non-GRE Recipients	TOTAL ACTUALS	Payments to Government Reporting Entity (GREs)	Payments to non-GRE Recipients	TOTAL ESTIMATE	Payments to Government Reporting Entity (GREs)	Payments to non-GRE Recipients	TOTAL Q1 FORECAST		Payments to Government Reporting Entity (GREs)	Payments to non-GRE Recipients	TOTAL Q3 FORECAST	
Operation of Hospitals TOTAL	948,201.2		948,201.2	325,449.1	(825.4)	324,623.7	34.2%	149,805.7	0.0	149,805.7	75,121.3	0.0	75,121.3	224,927.0	0.0	224,927.0	58.0%	234,063.7	0.0	234,063.7	82.6%
Grants to compensate for municipal taxation - public hospitals TOTAL	240.3		240.3	0.0	0.0	0.0	0.0%	240.3	0.0	240.3	0.0	0.0	0.0	240.3	0.0	240.3	100.0%	0.0	0.0	0.0	100.0%
Long-Term Care Homes TOTAL	210,355.3		210,355.3	3,040.4	47,948.6	50,989.0	24.2%	2,118.1	33,365.8	35,483.9	1,259.2	17,214.5	18,473.7	3,377.3	50,580.3	53,957.6	49.9%	3,242.2	49,637.1	52,879.3	75.0%
Community Care Access Centres TOTAL	118,647.1		118,647.1	0.0	29,013.4	29,013.4	24.5%	0.0	19,566.9	19,566.9	0.0	11,491.1	11,491.1	0.0	31,058.0	31,058.0	50.6%	0.0	29,302.1	29,302.1	75.3%
Community Support Services TOTAL	27,675.1		27,675.1	148.7	6,412.7	6,561.4	23.7%	105.3	4,318.2	4,423.5	50.8	2,414.3	2,465.1	156.1	6,732.6	6,888.7	48.6%	188.4	6,933.1	7,121.5	74.3%
Acquired Brain Injury TOTAL	2,664.8		2,664.8	0.0	639.2	639.2	24.0%	0.0	471.1	471.1	0.0	222.1	222.1	0.0	693.2	693.2	50.0%	0.0	666.2	666.2	75.0%
Assisted Living Services in Supportive Housing TOTAL	18,366.3		18,366.3	112.6	4,210.3	4,322.9	23.5%	68.8	2,806.8	2,875.6	36.3	1,948.4	1,984.7	105.1	4,755.2	4,860.3	50.0%	108.8	4,482.7	4,591.5	75.0%
Community Health Centres TOTAL	19,237.0		19,237.0	0.0	4,674.7	4,674.7	24.3%	0.0	3,102.7	3,102.7	0.0	1,851.4	1,851.4	0.0	4,954.1	4,954.1	50.1%	0.0	4,804.1	4,804.1	75.0%
Community Mental Health TOTAL	54,211.4		54,211.4	6,885.8	6,324.6	13,210.4	24.4%	4,624.7	4,543.4	9,168.1	2,298.7	2,214.8	4,513.6	6,923.5	6,758.2	13,681.7	49.6%	6,896.2	6,763.0	13,659.2	74.8%
Addictions Program TOTAL	21,108.0		21,108.0	2,609.6	2,798.4	5,408.0	25.6%	1,739.7	1,734.7	3,474.3	869.8	867.3	1,737.2	2,609.5	2,602.0	5,211.5	50.3%	2,609.5	2,634.7	5,244.2	75.2%
Specialty Psychiatric Hospitals TOTAL	0.0		0.0	0.0	0.0	0.0	0.0%	0.0	0.0	0.0			0.0	0.0	0.0	0.0	0.0%	0.0	0.0	0.0	0.0%
Grants to compensate for municipal taxation - psych hospitals TOTAL	0.0		0.0	0.0	0.0	0.0	0.0%	0.0	0.0	0.0			0.0	0.0	0.0	0.0	0.0%	0.0	0.0	0.0	0.0%
Initiatives (Note 3)	20,271.1		20,271.1	0.0	0.0	0.0	0.0%	0.0	0.0	0.0			0.0	0.0	0.0	0.0	0.0%	0.0	10,135.5	10,135.5	50.0%
										0.0											
TOTAL LHIN	1,440,977.5	0.0	1,440,977.5	338,246.1	101,196.6	439,442.7	30.5%	158,702.7	69,909.7	228,612.4	79,636.1	38,224.0	117,860.0	238,338.8	108,133.6	346,472.4	54.5%	247,108.8	115,358.6	362,467.4	79.7%

- Notes:
1. No input required for labelled Column A to E, G and J. These columns are locked.
 2. Detail input required for labelled Column F, H, and I related to the monthly/quarterly Estimated Expenditure.
 3. Actual payments (IFIS) for TP sectors above may include payments related to initiatives.

(I) Forecast by Quarter 4 (Q4)				(J=D+E+F+G+H+I) Forecast Year-end Position			(J-C) Variance	Explanation of Variance
Payments to Government Reporting Entity (GREs)	Payments to non-GRE Recipients	TOTAL Q4 FORECAST	% Expended to-date	Payments to Government Reporting Entity (GREs)	Payments to non-GRE Recipients	TOTAL YEAR-END POSITION		
164,586.9	0.0	164,586.9	100.0%	949,026.6	(825.4)	948,201.2	0.0	
0.0	0.0	0.0	100.0%	240.3	0.0	240.3	0.0	
3,242.2	49,287.2	52,529.4	100.0%	12,902.2	197,453.1	210,355.3	0.0	
0.0	29,273.5	29,273.5	100.0%	0.0	118,647.1	118,647.1	0.0	
170.4	6,933.1	7,103.5	100.0%	663.6	27,011.5	27,675.1	0.0	
0.0	666.2	666.2	100.0%	0.0	2,664.8	2,664.8	0.0	
108.8	4,482.7	4,591.5	100.0%	435.3	17,931.0	18,366.3	0.0	
0.0	4,804.1	4,804.1	100.0%	0.0	19,237.0	19,237.0	0.0	
6,896.2	6,763.9	13,660.1	100.0%	27,601.7	26,609.8	54,211.5	0.0	
2,609.5	2,634.7	5,244.2	100.0%	10,438.1	10,669.9	21,108.0	0.0	
0.0	0.0	0.0	0.0%	0.0	0.0	0.0	0.0	
0.0	0.0	0.0	0.0%	0.0	0.0	0.0	0.0	
0.0	10,135.5	10,135.5	100.0%	0.0	20,271.1	20,271.1	0.0	
177,614.0	114,981.0	292,595.0	100.0%	1,001,307.7	439,669.8	1,440,977.5	0.0	

LHIN Operations Sub-category	NE Report on LHIN Operations -- 2013/14 Q2 (\$ to the \$Dollar)																	Note: Amounts are provided for illustrative purpose.	
	(A)	(B)	(C=A+B)	(D) (F=E/D)		(G=D+E)	(H)	(I) (J=I/D)		(K) (L=K/D)		(M) (N=M/D)		(O=F+I+K+M)	(P=O-C)	(R)			
	Base Allocation	In-Year Adjustments	Revised Allocation	Q1 Actual		Q2 Estimated Quarter End					Q3 Forecast		Q4 Forecast		Forecast Year-end Position	Variance (note 1)	Explanation of Variance		
				April - June Actuals	% to Revised Allocation	July & August Actuals	September Forecast	% Estimate / Actuals	Total	% to Revised Allocation	Oct, Nov and Dec Estimate	% to Revised Allocation	Jan, Feb and Mar Estimate	% to Revised Allocation			Forecast Year-end vs Revised Allocation (note 1)		Sept Estimate % and Quarterly Forecast % for TOTAL BUDGET (note 2 and 3)
Allocation	4,752,782		4,752,782	1,250,721	26%	729,594	396,067	54%	1,125,661	24%	1,188,200	25%	1,188,200	25%	4,752,782	-			
Salaries & Wages																			
Salaries & Wages	3,018,695		3,018,695	725,792	24%	473,697	228,268	48%	701,965	23%	795,922	26%	793,015	26%	3,016,694	(2,001)			
Subtotal (Salaries & Wages)	3,018,695	-	3,018,695	725,792	24%	473,697	228,268	48%	701,965	23%	795,922	26%	793,015	26%	3,016,694	(2,001)			
Employee Benefits																			
HOOPP	301,870		301,870	61,086	20%	45,099	20,544	46%	65,643	22%	71,633	24%	71,262	24%	269,624	(32,246)			
Other Benefits	332,056		332,056	85,698	26%	42,774	18,261	43%	61,035	18%	63,674	19%	105,744	32%	316,151	(15,905)			
Subtotal (Employee Benefits)	633,926	-	633,926	146,784	23%	87,873	38,805	44%	126,678	20%	135,307	21%	177,006		585,775	(48,151)			
Transport & Communication																			
Staff Travel	194,579		194,579	34,326	18%	12,364	21,300	172%	33,664	17%	56,800	29%	71,000	36%	195,790	1,211		Fluctuation in expenses and variance are due to changing monthly/quarterly activity levels	
Governance Travel	14,151		14,151	1,155	8%	769	2,840	369%	3,609	26%	4,970	35%	4,970	35%	14,704	553		Fluctuation in expenses and variance are due to changing monthly/quarterly activity levels	
Communications	71,747		71,747	15,674	22%	10,627	29,465	277%	40,092	56%	29,820	42%	29,820	42%	115,406	43,659		Fluctuation in expenses and variance are due to changing monthly/quarterly activity levels	
Other T & C	10,613		10,613	2,580	24%	195	1,420	728%	1,615	15%	2,840	27%	2,840	27%	9,875	(738)		Fluctuation in expenses and variance are due to changing monthly/quarterly activity levels	
Subtotal (Transport & Communication)	291,090	-	291,090	53,735	18%	23,955	55,025	230%	78,980	27%	94,430	32%	108,630	37%	335,775	44,685			
Services																			
Accommodation	217,083		217,083	54,030	25%	37,140	18,105	49%	55,245	25%	54,315	25%	54,315	25%	217,905	822			
Advertising	10,613		10,613	382	4%	71	3,550	5000%	3,621	34%	2,840	27%	2,840	27%	9,683	(930)		July and August figure was immaterial leading to the large September variance	
Banking	-		-	-	0%	-	-	0%	-	0%	-	0%	-	0%	-	-			
Consulting Fees	70,756	-	70,756	18,042	25%	2,570	1,065	41%	3,635	5%	24,850	35%	24,850	35%	71,377	621			
Equipment Rentals	12,382		12,382	1,583	13%	1,829	2,130	116%	3,959	32%	3,195	26%	3,195	26%	11,932	(450)		some itme billed quarterly which leads to variances	
Insurance	4,245		4,245	2,757	65%	663	1,562	236%	2,225	52%	-	0%	-	0%	4,982	737		variances are a result of billing patterns	
LSSO Shared Costs	248,822		248,822	62,420	25%	41,613	20,804	50%	62,417	25%	62,420	25%	62,420	25%	249,677	855			
LHIN Collaborative	33,609		33,609	33,725	100%	-	-	0%	-	0%	-	0%	-	0%	33,725	116		variances are a result of billing patterns	
Other Meeting Expenses	42,454		42,454	7,285	17%	2,851	3,550	125%	6,401	15%	12,425	29%	15,975	38%	42,086	(368)		Fluctuation in expenses and variance are due to changing monthly/quarterly activity levels	
Board Chair's Per Diem expenses	14,151		14,151	-	0%	-	3,550	0%	3,550	25%	5,325	38%	5,325	38%	14,200	49			
Other Board Members' Per Diem expenses	14,151		14,151	710	5%	568	710	125%	1,278	9%	6,390	45%	6,390	45%	14,768	617		Fluctuation in expenses and variance are due to changing monthly/quarterly activity levels	
Other Governance Costs	13,444		13,444	1,458	11%	845	3,550	420%	4,395	33%	3,905	29%	3,905	29%	13,663	219		Fluctuation in expenses and variance are due to changing monthly/quarterly activity levels	
Printing and Translation	53,067		53,067	9,431	18%	5,216	5,325	102%	10,541	20%	13,845	26%	19,525	37%	53,342	275		Fluctuation in expenses and variance are due to changing monthly/quarterly activity levels	
Staff Development	28,302		28,302	5,098	18%	2,084	3,550	170%	5,634	20%	7,810	28%	10,012	35%	28,554	252		Fluctuation in expenses and variance are due to changing monthly/quarterly activity levels	
Other Services	-		-	-	0%	-	-	0%	-	0%	-	0%	-	0%	-	-			
Subtotal (Services)	763,079	-	763,079	196,921	26%	95,450	67,451	71%	162,901	21%	197,320	26%	208,752	27%	765,894	2,815			
Supplies & Equipment																			
IT Equipment	10,613		10,613	600	6%	2,678	710	27%	3,388	32%	710	7%	8,875	84%	13,573	2,960			
Office Supplies & Purchased Equipment	35,379		35,379	3,419	10%	6,092	3,550	58%	9,642	27%	7,810	22%	7,810	22%	28,681	(6,698)			
Other S & E			-		0%			0%	-	0%		0%		0%	-	-			
Subtotal (Supplies & Equipment)	45,992	-	45,992	4,019	9%	8,770	4,260	49%	13,030	28%	8,520	19%	16,685	36%	42,254	(3,738)			
Minor Capital Assets Purchased			-	6,390	0%	-		0%	-	0%		0%		0%	6,390	6,390			
Subtotal (Minor Capital Assets Purchased)	-	-	-	6,390	0%	-	-	0%	-	0%	-	0%	-	0%	6,390	6,390			
TOTAL	4,752,782	-	4,752,782	1,133,641	38%	689,745	393,809	57%	1,083,554	15%	1,231,499	26%	1,304,088	27%	4,752,782	-			
Prior Year Balance			-		0%			0%	-	0%		0%		0%	-	-			
Prior Year Recovery			-		0%			0%	-	0%		0%		0%	-	-			
Net 2013/14 Operational Position	4,752,782	-	4,752,782	1,133,641	24%	689,745	393,809	57%	1,083,554	23%	1,231,499	26%	1,304,088	27%	4,752,782	-			
Non-Operational Funding (if applicable)																			
Aboriginal Community Engagement	100,000		100,000	23,333	23%	16,528	7,500	45%	24,028	24%	25,000	25%	27,639	28%	100,000	-			
French Language Health Services	296,800		296,800	65,187	22%	37,539	24,000	64%	61,539	21%	80,000	27%	90,074	30%	296,800	-			
French Planning Entities	796,159		796,159	199,038	25%	132,692	66,346	50%	199,038	25%	199,038	25%	199,045	25%	796,159	-			
Critical Care Lead	75,000		75,000	18,000	24%	12,000	7,000	58%	19,000	25%	19,000	25%	19,000	25%	75,000	-			
ED Lead	75,000		75,000	18,750	25%	12,500	6,250	50%	18,750	25%	18,750	25%	18,750	25%	75,000	-			
ER/ALC Lead	100,000		100,000	28,596	29%	28,645	9,000	31%	37,645	38%	28,000	28%	5,759	6%	100,000	-			
Diabetes Regional Coordination Group (DRCC) - Base	1,087,560	(1,087,560)	-		0%			0%	-	0%		0%		0%	-	-			
DRCC – Salaries & Benefits		835,815	835,815	196,637	24%	126,551	65,000	51%	191,551	23%	223,000	27%	224,627	27%	835,815	-			
DRCC – Overhead		251,745	251,745	64,111	25%	23,605	15,000	64%	38,605	15%	74,000	29%	75,029	30%	251,745	-			
Primary Care LHIN Lead		75,000	75,000	18,750	25%	12,500	6,250	50%	18,750	25%	18,750	25%	18,750	25%	75,000	-			
E-Health		580,000	580,000	146,671	25%	84,462	50,000	59%	134,462	23%	150,000	26%	148,867	26%	580,000	-			
Total Non-Operational Funding	2,530,519	655,000	3,185,519	779,073	24%	487,022	256,346	53%	743,368	23%	835,538	26%	827,540	26%	3,185,519	-			

DRAFT

NORTH EAST LHIN – AUDIT COMMITTEE WORK PLAN – FISCAL 2012/ 13

ACTI VI TY	Date	Apr.	May 23 *	June	July	Aug.	Sept. 13 *	Oct.	Nov.	Dec.	January 30 *	Feb.	March 28 SSM
	Time						10-10:30 a.m.				1-1:30 p.m.		1-1:30 p.m.
Review and approve the NE LHIN budget for the year			x										
Review Budget Summary Report							x				x		x
Review/approval of Quarterly Reports											Review Q3		Q4
Confirm electronic bank signatures are up to date											x		
Annual Policy Review: - Respectful Workplace - Safeguarding of Fixed Assets - Amortization of Capital Assets - Board Remuneration - Travel Expense Policy - Disclosure of Wrongdoing - Fraud and Irregularities - LHIN-Wide Per-Diem Guidelines											x		
Meet with Auditors in Closed Session											x		
Presentation of Auditors Report in Open Session			x										
HAST											x		

* = Meeting held via teleconference

Resolution
North East Local Health Integration Network (the “Corporation”)

Motion No.: 2013-AC013

Moved by: _____

Seconded by: _____

Thursday, September 26, 2013

RESOLVED THAT:

The Audit Committee meeting of September 26, 2013 be adjourned at _____.

Colin Germond
Chair of the Audit Committee

**North East Local Health Integration Network
Governance Committee Meeting**

Thursday, September 26, 2013

2:30 p.m.

Teleconference

Participants: 1-800-952-5114 Passcode: 4652967

NOTE: DIRECTORS ARE REQUESTED TO NOTIFY THE CHAIR PRIOR TO THE COMMENCEMENT OF THE BOARD MEETING WITH RESPECT TO POTENTIAL CONFLICTS OF INTEREST ARISING FROM ITEMS ON THE AGENDA.

Item No.	Topic	Lead	Proposed Outcome	Page No.
Governance Committee Meeting				
1.0	Call to Order	Danielle Bélanger-Corbin		
2.0	Declaration of Conflict of Interest	Danielle Bélanger-Corbin		
3.0	Approval of Agenda	All	D	26
4.0	Approval of Minutes of previous proceedings	All	D	28
5.0	Update on Board Recruitment	Danielle Bélanger-Corbin	I	
6.0	Update on HPAC	Louise Paquette	I	
7.0	Proceed to Closed session to discuss matters involving: ▪ Personnel matters	Elaine Pitcher	D	32
12.0	Report from the Closed session	Elaine Pitcher	D	39
13.0	Next Meeting ▪ October 24, 2013 (Board of Directors) ▪ November 28, 2013 (Governance Committee)	Danielle Bélanger-Corbin	I	
14.0	Adjournment of Governance Committee Meeting	Danielle Bélanger-Corbin	D	40

D=Decision, I=Information

Committee Members:

Danielle Bélanger-Corbin, Chair of Governance Committee and Board Director

Elaine Pitcher, Chair of the Board of Directors

Colin Germond, Vice-Chair of the Board of Directors

Cecilia Bruno, Board Director

Santina Marasco, Board Director

Louise Paquette, Chief Executive Officer (ex-officio)

Martha Auchinleck, Senior Director (ex-officio)

Kate Fyfe, Senior Director (ex-officio)

Resolution
North East Local Health Integration Network (the “Corporation”)

Motion No.: 2013-GC014

Moved by: _____

Seconded by: _____

Thursday, September 26, 2013

RESOLVED THAT:

The agenda for the Governance Committee Meeting of September 26, 2013 be approved as presented.

Danielle Bélanger-Corbin
Chair of the Governance Committee

**NORTH EAST LOCAL HEALTH INTEGRATION NETWORK
BOARD RELATED MEETING(S)
GOVERNANCE COMMITTEE MEETING**

2:30 p.m.

Teleconference

MINUTES OF PROCEEDINGS

Thursday, April 25, 2013

ROLL CALL

Members in Attendance: Danielle Bélanger-Corbin
via teleconference Elaine Pitcher
Colin Germond
Santina Marasco

Regrets: Cecilia Bruno

Staff: Louise Paquette, Chief Executive Officer
Renée Leclerc, Executive Assistant to the CEO and Board Liaison

CALL TO ORDER

Danielle Bélanger-Corbin, Chair of the Governance Committee, called the meeting to order at 2:38 p.m.

DECLARATION OF CONFLICT OF INTEREST

No conflicts of interest were declared or identified.

AGENDA

An update on the Health Professionals Advisory Committee will be added to the agenda under item 14.0, *New Business*.

{ Motion 2013-GC001 }

Moved by Elaine Pitcher, seconded by Colin Germond.

Be it resolved that the agenda for the Governance Committee meeting of April 25, 2013, be approved as presented and amended.

{ Carried }

MINUTES OF LAST MEETING

{ Motion 2013-GC002 }

Moved by Santina Marasco, seconded by Colin Germond.

Be it resolved that the Minutes of Proceedings for the Governance Committee meeting of February 28, 2013 be approved as presented.

{ Carried }

2013 MEETING SCHEDULE AND RETREAT: Danielle Bélanger-Corbin

The Governance Committee discussed upcoming Board and Committee meeting dates as well as dates for a Board Retreat and approved the following schedule for the remainder of the 2013 calendar year:

May 23

Audit Committee: 1:30pm to 2:30pm via teleconference

Board of Directors: 2:30pm to 4:30pm via teleconference

June 26/ 27

Retreat: in-person, Sault Ste. Marie

July

No meetings

August 22

Board of Directors: 1:30pm to 4:30pm via teleconference

September 26

Audit Committee: 1:30pm to 2:30pm via teleconference

Governance Committee: 2:30pm to 3:30pm via teleconference

October 24

Board of Directors: 1:30pm to 4:30pm in-person, Sudbury

November 28

Audit Committee: 1:30pm to 2:30pm via teleconference

Governance Committee: 2:30pm to 3:30pm via teleconference

December

No meetings

MOVE TO CLOSED SESSION : Danielle Bélanger-Corbin

{ Motion 2013-GC003 }

Moved by Colin Germond, seconded by Elaine Pitcher.

Be it resolved that the members attending this meeting move into an closed session pursuant to the following exceptions of LHINS set out in s.9(5) of the Local Health Integration Act, 2006:"

- ☐ *Personal or public interest*
- ☐ *Public security*
- ☐ *Security of the LHIN and its directors*
- ☐ *Personal health information*
- ☐ *Prejudice to legal proceedings*
- ☐ *Safety*
- ☒ *Personnel matters*
- ☐ *Labour relations*
- ☐ *Matters subject to solicitor client privilege*
- ☐ *Matters prescribed by regulation*
- ☐ *Deliberations on whether to move into a Closed session*

Be it further resolved that the following persons be permitted to attend:

Louise Paquette, Chief Executive Officer

Renée Leclerc, Executive Assistant to the CEO and Board Liaison

{ Carried }

REPORT FROM CLOSED SESSION: Danielle Bélanger-Corbin

{ Motion 2013-GC004 }

Moved by Colin Germond, seconded by Elaine Pitcher.

Be it resolved that the Governance Committee receive the report of its Closed Session meeting of April 25, 2013.

{ Carried }

NEW BUSINESS: Danielle Bélanger-Corbin

Health Professionals Advisory Committee (HPAC)

At the previous Governance Committee meeting, Committee members were informed of the vacancy status of HPAC. Since then, the LHIN has successfully filled the majority of those vacancies, however, a vacant position remains requiring a LHIN Board member's participation. Chair Elaine Pitcher has volunteered to fill this vacancy and will therefore represent the LHIN Board on HPAC. A meeting of the Advisory Committee is set for June 24.

NEXT MEETING

The next Governance Committee meeting will take place via teleconference on September 26, 2013 via teleconference.

MEETING ADJOURNMENT

{ Motion 2013-GC005 }

Moved by Elaine Pitcher, seconded by Colin Germond.

Be it resolved that the Governance Committee Meeting of April 25, 2013 be adjourned at 3:29 p.m.

{ Carried }

Danielle Belanger-Corbin
Chair of the Governance Committee

Resolution
North East Local Health Integration Network (the “Corporation”)

Motion No.: 2013-GC017

Moved by: _____

Seconded by: _____

Thursday, September 26, 2013

RESOLVED THAT:

The Governance Committee received the report of its Closed Session meeting of September 26, 2013.

Danielle Bélanger-Corbin
Chair of the Governance Committee

Resolution
North East Local Health Integration Network (the “Corporation”)

Motion No.: 2013-GC018

Moved by: _____

Seconded by: _____

Thursday, September 26, 2013

RESOLVED THAT:

The Governance Committee meeting of Thursday, September 26, 2013 be adjourned at
_____.

Danielle Bélanger-Corbin
Chair of the Governance Committee